HBL حبيب بنك المحدود HABIB BANK LIMITED

Account Activation Request

Personal Banking and Business Banking Accountholders

NOTE: Please fill-in this form in "BLOCK" letters and sign at all required places. * Indicates mandatory field

Date* D D M M Y Y Y Y **Branch*** Code Name

Customer ID

Account Details

Account Name *

Account Number *

Reason of inactivity * ☐ Travelling / Out of country ☐ Account maintained for Savings/Investment Purposes

☐ Other *(please specify)*

I/We hereby request to activate the aforementioned account / all my accounts under the above mentioned Customer ID, which has/have become inactive due to the reason(s) mentioned above. I/We, the undersigned, hereby declare to have read and unconditionally agree to HBL's Terms and Conditions.

Primary Accountholder Name	Signature	Signature Verification (Bank Staff)	
Joint Accountholder Name	Signature	Signature Verification (Bank Staff)	
Joint Accountholder Name	Signature	Signature Verification (Bank Staff)	
Joint Accountholder Name	Signature	Signature Verification (Bank Staff)	Company Stamp (For Business Accountholders)

Disclosure

The process is subject to complete verification of the information provided by the customer and may take additional time to process the request. The bank may contact you in case of any additional information required.	تخضع المعاملة للتحقق الكامل من صحة البيانات المقدمة من العميل، وقد تستغرق عملية التحقق وقتًا إضافيًا لمعالجة الطلب. قد يتواصل بك أحد موظفي البنك في حالة وجود أي معلومات إضافية مطلوبة.

For Bank Use only

Checklist *(By CSO/Relationship Manager)*	Description / Document Name / Additional Form Name	Original Seen & Stamped
☐	Emirates ID (For Resident Accountholders)	☐ Yes ☐ No ☐ NA
☐	Passport & Entry Stamp (For Non-Resident Accountholders)	☐ Yes ☐ No ☐ NA
☐	Trade License (For Business Banking Accountholders)	☐ Yes ☐ No ☐ NA
☐	Accountholder Information Update Form (If information is outdated)	☐ Yes ☐ No ☐ NA
☐	FATCA Form - for Personal Banking Accountholders	☐ Yes ☐ No ☐ NA
☐	FATCA Form - for Business Banking Accountholders	☐ Yes ☐ No ☐ NA
☐	Customer has visited in-person and is interviewed by the CSO / RM	☐ Yes ☐ No ☐ NA
☐		☐ Yes ☐ No ☐ NA
☐		☐ Yes ☐ No ☐ NA
☐		☐ Yes ☐ No ☐ NA

Request verification *(By CSO/Relationship Manager)*

☐ Form is filled completely and signed ☐ All documents listed above are are obtained as applicable ☐ All additional documents required are obtained

☐ Request received via Courier ☐ Callback confirmation received on Phone #

Account Activation *(By Centralized Operations)*

☐ Signature(s) Verified ☐ Account Activated and AOF placed in the active folder ☐ Accountholder's profile is updated in the system

	Name	Signature	Date
CSO/Relationship Manager			
Application Processed by			
Application Supervised by			

HBL-UAE-AAR-091016/1